

Okaloosa County Health Department

Okaloosa-Walton Medical Reserve Corps Operations and Management Plan

(Annex 5, Tab 8 of OCHD All-Hazards Plan)

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I. EXECUTIVE SUMMARY

Medical Reserve Corps (MRC) were organized after the September 11, 2001 terrorist attacks in response to the President's call for citizens to volunteer in the USA Freedom Corps, the umbrella under which the MRC falls. During the response to the attacks of 9/11, thousands of people showed up wanting to help those in need; however, there was no way to credential and ID these spontaneous volunteers. The Medical Reserve Corps provides a method to recruit, train, manage and credential volunteers for disaster situations.

The Okaloosa -Walton Medical Reserve Corps (OWMRC), one of 933 units nationwide, was created in fall of 2006 to assist in public health emergencies within Okaloosa and Walton Counties. The two counties have a history of similar disasters. The populations in these counties are intermingled (many people live in one and work in the other). Primary missions for the OWMRC include staffing of Points of Dispensing during mass prophylaxis/vaccination and Alternate Medical Treatment Sites during large-scale disease outbreaks.

This plan serves as the volunteer management plan for OWMRC members and all other OCHD emergency response volunteers who may not be part of the OWMRC. For non-OWMRC volunteers, the portions of this plan discussing membership do not apply.

II. INTRODUCTION

A. Overview of the Okaloosa-Walton Medical Reserve Corps

1. The Medical Reserve Corps (MRC) is the component of the Citizen Corps volunteer program that brings together local health professionals and others with relevant health-related skills to volunteer in their community. These volunteers will assist the local, existing community emergency medical response system, as well as provide a group of readily trained and available resources to help the community deal with pressing public health needs, improvements, and emergencies.
2. Medical Reserve Corps units provide healthcare professionals and others an organized mechanism through which they can volunteer their time and skills to strengthen their communities by preparing for and responding to large-scale or small emergencies, such as an influenza epidemic, chemical spill or act of terrorism.
3. Okaloosa-Walton Medical Reserve Corps (OWMRC) is hosted by the Okaloosa County Health Department (OCHD).

B. Mission Statement

The mission of the Okaloosa-Walton MRC is to engage health care professionals in helping the community prepare for, respond to and mitigate health and medical emergencies, disasters and other vital public health activities by providing a group of trained and readily available volunteer professionals to supplement and assist the local medical emergency response system. The Okaloosa-Walton MRC mission aligns with the Florida MRC Network mission, the 2011 - 2013 Florida Public Health and Medical Preparedness Strategic Plan and the National MRC basic goal of improving capacity of existing units to meet local emergency preparedness and response needs.

C. Purpose

The purpose of OWMRC is to:

1. Provide properly trained and equipped medical and support personnel to aid in the organized response to an emergency or disaster event; whether naturally occurring, technological or man-made in nature.
2. Create a framework to match medical volunteers' skills with identified needs in the community.
3. Allow local volunteer medical and health professionals to contribute their skills and expertise throughout the year as well as during times of community need.

D. Plan Objectives

1. This plan will establish the necessary organizational, operational and administrative procedures for the effective operation of OWMRC.
2. This plan will provide guidance to OWMRC volunteers, medical practitioners, public health officials, emergency service personnel and others for the effective integration of volunteers in emergency medical operations and public health activities.
3. Identify and outline professional specialties, qualifications and training needs for membership in OWMRC with consultation of the OWMRC Board of Advisors.

E. Situation

1. There are four acute care hospitals in Okaloosa and Walton Counties serving a population of over 253,000 people. Okaloosa and Walton Counties have a healthy tourism industry which can add over 40,000 people during the peak of tourism season (summer) to the year round population. A large-scale public health emergency or disaster with mass casualties will severely tax the resources of these healthcare facilities.
2. Historically, medical personnel spontaneously volunteer to assist in public health emergencies or disasters. Spontaneous unaffiliated volunteers may not be familiar with the organization and structure of the existing local emergency response system, and therefore, may not be as effective and efficient in the provision of emergency medical services as members of organized response groups.
3. Local public health agencies do not have adequate staffing for mass immunization or prophylaxis, alternate medical treatment site and triage operations and will need assistance from volunteer medical and other personnel in these and other public health operations.

F. Assumptions

1. In a large-scale mass casualty event, it is assumed that emergency rooms of the counties' four acute care hospitals will be quickly overwhelmed and the traditional "treat

and transport” mechanism may not be sufficient to minimize loss of life. Due to the potential delay in treatment at emergency rooms, patients may need to be properly triaged, periodically assessed and receive life-saving care at an Alternate Medical Treatment Site (AMTS). OWMRC personnel may be called to assist with such medical operations.

2. Emergencies, especially those that are large-scale, may require medical response operations in AMTSs and Points of Dispensing (PODs) for extended periods of time.
3. Okaloosa and Walton Counties will be responding to the emergency at the local level for at least the first 72 hours before outside assistance arrives.
4. Adequate supplies of required medical equipment and pharmaceuticals may not be immediately available to medical personnel due to logistical disruptions or other limitations caused by an emergency situation.
5. Area organizations and public health agencies are aware of the organization and capabilities of the OWMRC and may request the unit’s assistance through the county ESF8 representative who will contact the OWMRC Coordinator.
6. OWMRC is an organization comprised of volunteers; therefore, there can be no assumption or guarantee of the number of volunteers who will respond when called.
7. The State Emergency Responders and Volunteers of Florida (SERVFL) is the State of Florida’s online system for managing public health and medical disaster responders (volunteers and staff teams). SERVFL registry supports a variety of personnel who may be utilized during disasters, all-hazard response efforts, and public health activities. SERVFL.com is the Florida ESAR-VHP. (ESAR-VHP is the emergency system for the advance registration of volunteer health professionals. It is a national effort.) The SERVFL system and the DOH Chapter 110 Volunteer Program will be used to manage the recruiting and selection process for OWMRC volunteers.

G. Local Plan Coordination

OWMRC operational procedures shall be coordinated with appropriate response and receiver agencies, including, but not limited to:

- Okaloosa and Walton County Health Departments
- Okaloosa and Walton County Emergency Management
- Okaloosa and Walton ESF-8 representatives
- Citizen's Corps Council

III. CONCEPT OF OPERATIONS

A. Overview

1. Okaloosa County Health Department is the host organization for the OWMRC. The OWMRC Coordinator is an employee of OCHD and is responsible for development and administration of OWMRC as outlined by the

- Memorandum of Understanding Between Florida Department of Health and Medical Reserve Corps Site Coordinators
 - Guidelines for the Florida Medical Reserve Corps Network
 - Florida Medical Reserve Corps Network Strategic Plan for 2010 - 2013
 - National MRC basic goals through the Program Office's Strategic Plan
2. OWMRC volunteers, whether medical professionals or support personnel, will be recruited, trained, assigned and directed by the OWMRC Coordinator, OWMRC Team Leader, OWMRC Assistant Team Leaders and the OWMRC Board of Advisors.
 3. OWMRC will serve as county-wide resources, augmenting, assisting and supporting the existing medical and public health systems in emergencies and disasters in both Okaloosa and Walton Counties.
 4. OWMRC is an "all-hazards" resource; OWMRC personnel and resources may be utilized in any type of natural, technological or manmade emergency. OWMRC personnel will only be used in functional areas or given assignments for which they are properly trained and equipped. "Just-in-time" training may be used.
 5. OWMRC may be used in large-scale, complex emergencies involving multiple jurisdictions and interagency operations. The unit's personnel and resources may also be used in smaller incidents involving a single jurisdiction or agency.
 6. OWMRC volunteers will receive position-specific training including goals, roles, tasks, safety procedures and equipment, Incident Command System (ICS) and specific operating environments before assignments to teams. When necessary, Just-In-time (JIT) training will be provided.

B. Activation of the OWMRC

The OWMRC volunteers may be activated for training and exercises. The OCHD Director or Walton CHD Administrator will activate the OWMRC for public health emergencies when notified by the responsible agency that staffing is inadequate for response and OWMRC volunteer skill sets are needed for effective response.

1. Activation Authority
 - OWMRC will be activated through Okaloosa or Walton County ESF-8 request to the OWMRC Coordinator. The OWMRC Coordinator will obtain approval from either (or both dependent upon required operations locations) the Okaloosa CHD Director or the Walton CHD Administrator to activate the OWMRC. **The CHD Director/Administrator must approve the activation and agree to the method of supervision for activated volunteers; i.e., on-site supervision or other appropriate method.**
 - As a local emergency medical resource, OWMRC assistance may be requested, using the procedures in paragraph 2 below, by:
 - Officials responsible for emergency management or public health, or their designated representatives.
 - Okaloosa and Walton County Health Department Director (or Administrator)
 - Okaloosa or Walton County Emergency Management agencies

2. Activation Procedure

- OWMRC activation is requested by contacting the county ESF-8 representative (if ESF-8 is not activated, the request is made directly to the OWMRC Coordinator). ESF-8 should obtain the following information from the requesting official and pass it to the OWMRC Coordinator. If incomplete information is provided, the OWMRC Coordinator will obtain the following information from the official requesting the activation of the OWMRC.
 - The nature and scope of the emergency.
 - The location of the emergency.
 - The agency having incident command authority.
 - Incident command contact phone number and/or radio frequency.
 - The estimated number of clients/patients and their needs.
 - The staging area or location to which the OWMRC unit should deploy.
 - Specific medical skills/resources needed, i.e., physicians, nurses, etc.
- The ESF-8 representative will validate the request. If the OWMRC is to be activated, ESF-8 will enter a mission request (informational) in the local and state tracking systems. ESF-8 will then contact the OWMRC Coordinator for activation. The contact information for the OWMRC Coordinator and other key organization personnel is contained in [Appendix C](#) of this plan.
- The OWMRC Coordinator will obtain permission from the OOOHD Director or WCHD administrator to activate the OWMRC.
- The OWMRC Coordinator notifies volunteers of activation via SERVFL, email list serve, and via telephone call-down when necessary.
- Activated OWMRC volunteers will be told upon activation where to assemble for deployment.
- Team leaders will issue OWMRC Identification Cards to volunteers at the assembly location.

C. Demobilization of OWMRC

1. OWMRC personnel will support emergency medical, public health and other personnel for the duration of an incident or as long as their assistance is required. It is possible that some OWMRC personnel and resources will be demobilized before others as their assignments are completed.

2. OWMRC volunteers will demobilize along with other on-scene personnel and resources, in accordance with the Incident Action Plan.

3. When demobilizing, OWMRC personnel must ensure the following actions are accomplished:

- Ensure all assigned activities are completed.
- Determine whether additional assistance is required.
- If within the scope of one's assignment, help ensure all injured personnel and fatalities are properly processed and transported to appropriate facilities.
- Account for and turn in OWMRC equipment.
- Clean up any debris or trash associated with OWMRC assignments.
- Check out with Incident Commander or Resource Unit prior to leaving incident.

IV. VOLUNTEER RECRUITMENT, SELECTION, RECOGNITION AND RETENTION

A. Recruitment

The OWMRC recruiting program includes:

1. Identification of required specialties and numbers of volunteers within those specialties. Current targeted specialties and recruitment goals for Okaloosa and Walton Counties combined are (these goals are based upon a respiratory illness outbreak/pandemic):
 - a. 15 Primary Care Physicians
 - b. 15 Medical Doctors MDs
 - c. 30 ARNPs or PAs
 - d. 60 RNs
 - e. 60 LPNs
 - f. 60 CNAs
 - g. 10 Respiratory Therapists
 - h. 10 Pharmacists
 - i. 10 Social workers, licensed mental health counselors or other mental health professionals
2. Identification of groups and organizations that may be a source of volunteers and conducting recruitment campaign with those groups. Organizations with which the OWMRC has an ongoing recruitment partnership include: FWB Medical Center, North Okaloosa Medical Center, Twin Cities Hospital, Northwest Florida State College Nursing Program, Choice Technology Center Nursing Program, Okaloosa County CERT.
3. Development and dispersion of recruiting and marketing materials. These materials include TV, newspaper and radio advertisements; billboards, pamphlets, newsletters.
4. Development and implementation of recruiting events and activities; i.e., college volunteer fairs, health fairs, presentations to nursing schools and other organizations.

B. Selection

1. Application selection criteria includes:
 - Registration in the State Emergency Responders and Volunteers of Florida database.
 - Completion of Chapter 110 Volunteer Enrollment
 - Screening and interview by OWMRC Coordinator or designee.
 - Possession of specialized skills, experience, licenses and/or certifications, if required by a unit position. Verification of credentials through applicable offices.
 - Successful completion of a Florida Department of Law Enforcement (FDLE) and Federal Bureau of Investigation (FBI) background check.
 - Positive reference checks.
2. Applicants will be screened and approved by the OWMRC Coordinator or designee.
3. All OWMRC volunteers must be enrolled as DOH Chapter 110 Volunteers Program.

C. Recruiting Administration

1. To the extent possible, recruiting efforts shall be coordinated with those of other area volunteer agencies, especially those using medical personnel. The Okaloosa County

Volunteer Center (administered by United Way of Okaloosa-Walton Counties) shall be the contact agency for day to day coordinating volunteers in Okaloosa County. The Voluntary Organizations Active in Disaster (VOAD) Emergency Support Function 15 shall be the contact for coordinating non-affiliated volunteers during disasters and Emergencies when ESF15 is activated.

2. The State Emergency Responders and Volunteers of Florida (SERVFL) database and the DOH Chapter 110 Volunteer Program will be used to manage the recruiting and selection process.

D. Recognition

1. All new volunteers receive a welcome letter from the OWMRC Coordinator.
2. As a volunteer completes each tier, in succession, of the OWMRC volunteer indoctrination listed below, the volunteer will receive the item shown for that tier.
 - a. Completion of orientation
 - MRC awareness bracelet
 - MRC sticker
 - MRC decal
 - MRC sticky note pad
 - MRC pen
 - MRC Button
 - b. Successful background check
 - MRC lanyard with badge clip
 - MRC lapel pin
 - MRC flashlight
 - c. Completion of training requirements Padfolio
 - d. Participation in 2 OWMRC events* OWMRC Go Bag
- * Event is defined as meetings, SERVFL exercises, training offerings, outreach events and combined OCHD – OWMRC activities.
3. All volunteers completing the training requirements shown in Appendix D will also be recognized in the quarterly newsletter.
4. All volunteers participating in events will be featured in the quarterly newsletter article about the event.
5. All volunteers providing service hours during the calendar year will receive a Volunteer Recognition Certificate recognizing their contribution of services.
6. The volunteer who provides the most service hours during the year will receive a Volunteer of the Year Service Award.
7. The Board of Directors may at any time during the year award other recognition (having no monetary value; i.e, certificates, recognition in newsletter or emails) as appropriate.

E. Retention: Meetings, communications, and training and exercise opportunities are the primary means of volunteer retention. Meetings and other communications also serve as a means of notifying volunteers of OWMRC activities.

V. TRAINING AND EXERCISES

A. Required Training

1. Once applicants have been screened and accepted for membership in OWMRC, an initial orientation and training program must be completed before they may fully participate in exercises and deployments.
2. The initial training program will consist of a series of required courses. The list of required initial training courses for OWMRC volunteers is contained in [Appendix D](#). Course descriptions are also included.
3. Elective training courses will also be offered periodically to OWMRC volunteers.
4. At the conclusion of the orientation and required training, a formal acknowledgement will be conducted where new OWMRC volunteers will be presented with OWMRC Go-Packs.

B. Exercises

1. Exercises are methods of evaluating local and regional responses to emergency incidents. Exercises should be designed to assess the readiness and training level of responding personnel and organizations. Exercises must be HSEEP compliant.
2. Exercises should include organizations potentially affected by the type of scenario or response being exercised, i.e. agencies at all levels of government, businesses and charitable and community organizations.
3. Participating in exercises is an invaluable means for OWMRC volunteers to use and test their training and knowledge. Exercises will be periodically available in which OWMRC volunteers can participate. Active OWMRC volunteers are required to participate in at least one exercise or activation annually.

C. Training Records

1. OWMRC shall maintain training records on all volunteers. The OWMRC Team Leader will obtain and keep on file volunteers' completed course certificates and input the training data in the State Emergency Responder and Volunteers of Florida (SERVFL) database.
2. OWMRC shall maintain records of all volunteer hours on all members. The OWMRC Team Leader will record all volunteer hours in the volunteer database and keep meeting/exercise participation rosters on file. (Form DH1495)

3. OWMRC volunteers must ensure their training and volunteer hour records are current by providing course certificates to the OWMRC Team Leader and signing in on participation rosters at all events. All records must be updated to reflect the completion of individual and OWMRC training, exercises and deployments.

VI. ADMINISTRATION

A. OWMRC Bylaws and Policies

The OWMRC shall be governed by the policies and bylaws contained in [Appendix E](#) of this plan.

B. Membership

1. Membership in OWMRC is open to anyone with a desire to serve their community in Okaloosa and/or Walton counties. Although the focus of OWMRC is emergency medical operations and public health activities, healthcare experience is not a prerequisite for service with the unit.
2. There are two categories of membership in the OWMRC. These categories are active and associate.
 - Active members are those volunteers who have:
 - Completed all requisite-training requirements.
 - Attended a minimum of one OWMRC meeting and one continued development training session per year.
 - Participate in one OWMRC exercise or activation.
 - Associate members are those individuals who have not satisfied the requirements for active membership. In accordance with the OWMRC bylaws and policies, associate members shall become active members once these requirements are met. Associate members may participate in all OWMRC activities except actual emergency medical response operations (unless otherwise authorized).

C. Unit Organization and Credentialing

1. OWMRC organizational structure is composed of the following functional areas:
 - Administration and Leadership Members:
 - OWMRC Coordinator
 - OWMRC Team Leader
 - OWMRC Assistant Team Leader(s)
 - OWMRC Board of Advisors
 - Medical Operations Division:
 - Physicians/Physicians Assistant Unit (T1, T2 with T1 supervision)
 - Nursing Unit (T1, T2 with T1 supervision)
 - Pharmacy Unit (T1, T2 with T1 supervision)
 - Mental Health Unit (T1, T2 with T1 supervision)
 - Mortuary Services Unit (T1, T2 with T1 supervision)
 - Public Health Unit (T1, T2, with T1 supervision)

- Ancillary Staff Unit (T1, T2, T3)
 - A Roster of key personnel is included in [Appendix C](#).
2. Active and Associate OWMRC Volunteers will be classified into three types of participation during drills, exercises and emergencies.
- Type 1 **(Red)** – Current, active professional license or certification
 - Type 1 volunteers are considered to be the “front-line” volunteers. These volunteers’ primary contributions in an emergency response will be their knowledge and training in medicine, as they will be providing direct patient care. Type 1 volunteers are required to have a current license or certification to perform at this Type.
 - Type 1 volunteers may also perform functions designated as Type 2 and 3.
 - **ESAR-VHP Credential Level 1** (The SERVFL vendor verifies this information manually twice a year.)
Level 1 ensures that an adequate supply of hospital-qualified health professionals is available to work in hospitals in times of an emergency. Hospital-qualified health professionals are distinguished from other health professionals through a rigorous and constant review of credentials and performance. **ASPR** standards for assignment to Credential Level 1 were developed in consultation with the hospital industry and reflect the level of review hospitals would require before accepting a volunteer into their facility. Assignment to Level 1 requires confirmation that the volunteer is clinically active in a hospital, either as an employee or by virtue of having hospital privileges. Implicit in this requirement is the ability to practice in a full and unrestricted manner within the State and meet other occupational specific qualifications identified later in this document.
- U.S. Department of Health and Human Services
Assistant Secretary for Preparedness and Response (**ASPR**)
<http://www.phe.gov/about/pages/default.aspx>
- **ESAR-VHP Credential Level 2** (The SERVFL vendor verifies this information manually twice a year.)
Level 2 ensures the availability of highly qualified individuals who may deliver services in a wide variety of settings such as clinics, nursing homes, and shelters. Typically, these health professionals possess all the credentials and qualifications of a Level 1 health professional except that they are not employed in a hospital nor do they have hospital privileges. Assignment to Level 2 requires confirmation that the volunteer is clinically active in any setting other than a hospital (e.g., clinic, private practice, nursing home, etc.). Implicit in this requirement is the ability to practice in a full and unrestricted manner within the State and meet other occupational specific qualifications identified later in this document.
- Type 2 **(Blue)** – Medical background or experience, not currently licensed
 - Type 2 volunteers may have some contact with patients; however, this contact will be indirect and will not involve patient care. Some examples of Type 2 tasks may include providing patient education and

staffing emergency shelters. Type 2 volunteers are required to have some medical background, but are not necessarily licensed.

- Type 2 volunteers may also perform functions designated as Type 3.
- **ESAR-VHP Credential Level 3** (SERVFL system automatically verifies this information every 30 days or you can verify this information at the local level.)

See the attached document for details.

Level 3 classifies individuals who meet the basic qualifications necessary to practice in the State in which they are registered.

Assignment to Level 3 requires verification of a volunteer's license, certification, or other State requirement to practice. In situations where the State does not govern a profession, ASPR has identified requirements that are deemed to be usual and customary for employment in the profession, which must be verified.

- Type 3 **(Yellow)** – Non-medical and support
 - Type 3 volunteers will be performing non-medical or administrative and “behind the scenes” functions such as data entry, clinic registration and language interpretation. Tasks designated as Type 3 are non-medical tasks.
 - Type 3 volunteers may only perform functions designated as Type 3.
 - **ESAR-VHP Credential Level 4**
Level 4 classifies individuals who have healthcare experience or education in an area that would be useful in providing basic healthcare not controlled by scope of practice laws and to assist clinicians. Assignment to Level 4 requires that the volunteer possess verified documentation of healthcare education or experience. This level may include, but is not limited to, healthcare students or retired healthcare professionals who no longer hold a license.
 - Volunteers with Indeterminate Credentials (No ECL) will be a Type 3.

D. Identification Cards

1. OWMRC Team Leader will issue official volunteer identification cards for use at the scene of an emergency. These identification cards will:
 - Identify volunteers as members of OWMRC.
 - Provide OWMRC volunteers with access to the scene of an emergency as part of the emergency medical response system.
 - Access the licenses, credentials, assigned Type, skills and training of OWMRC volunteers, thereby facilitating their activation in an emergency.
 - Facilitate the tracking and disposition of OWMRC volunteers at the scene of an emergency.
2. Official identification cards will be issued to volunteers upon activation and will expire one year from date of issue.
3. [Appendix F](#) contains a depiction of the OWMRC identification card.

E. Uniforms

1. When activated, OWMRC volunteers shall be issued a field identification shirt with the OWMRC logo on the chest and back. The wearing of uniforms by OWMRC volunteers serves several purposes:
 - Clearly identifies volunteers as official members of the OWMRC.
 - Enhances esprit de corps of OWMRC volunteers and facilitates a professional appearance.
 - Establishes a visual link between the OWMRC and other participating agencies.
2. The following policies apply to the wear of the OWMRC field identification shirt:
 - Only members of OWMRC are authorized to wear the official OWMRC shirt.
 - The OWMRC shirt must be worn during emergency response activities and when members are performing non-emergency duties assisting community organizations.
 - The OWMRC shirt should also be worn by OWMRC members during exercises or other training activities.

F. Equipment

All non-expendable equipment issued to OWMRC volunteers shall be returned at the conclusion of an exercise or activation, if directed by the OWMRC Coordinator or Team Leader. OWMRC volunteers must return all issued equipment when ending membership in the OWMRC.

G. OWMRC Finances and Records

1. OWMRC Coordinator will maintain all OWMRC financial records including purchasing, quarterly reports and funding applications.
2. OWMRC Team Leader will maintain all volunteer records including volunteer hours, courses completed and license verifications.
3. OWMRC records, with the exception of personal information on volunteers, shall be available for public review (i.e. training and finances).

H. OWMRC Meetings

1. OWMRC Coordinator/Team Leader will hold semi-annual meetings to keep volunteers informed and engaged.
2. Special meetings will be held called by the OWMRC Coordinator, or upon written request of the members. The OWMRC Coordinator or designee shall preside over all regular meetings of OWMRC.

G. Plan Review and Maintenance

1. The Operations and Management Plan will be reviewed at least annually by the OWMRC Board of Advisors and in accordance with the All-hazards Plan review schedule of the Okaloosa CHD.

2. The operational procedures described in this plan may be modified as a result of post-incident analyses, post-exercise critiques and After Action Reports.
3. This plan may also be modified any time there are changes in the organization, responsibilities, procedures, protocols, laws, rules or regulations affecting the management and operations of OWMRC.
4. Changes to this plan will be coordinated among the OWMRC Board of Advisors and, if applicable, area hospitals, Health Departments, emergency services organizations and applicable human services agencies.
5. It is the responsibility of each recipient of this plan to post and record changes to it.
6. Changes shall be published and distributed to all local organizations and OWMRC members holding this plan.

VII. LIABILITY PROTECTION

A. Introduction

1. OWMRC volunteers are protected from liability in varying degrees by state and federal laws.
2. The state and federal laws included in this plan may not be the only laws addressing liability protection for volunteers; there may be other state and federal laws not listed in this plan.

B. Federal Law-Section from US Code

Title 42 – The Public Health and Welfare

Chapter 139 – Volunteer Protection

§14502. Preemption and election of State non-applicability

(a) Preemption

This chapter preempts the laws of any State to the extent that such laws are inconsistent with this chapter, except that this chapter shall not preempt any State law that provides additional protection from liability relating to volunteers or to any category of volunteers in the performance of services for a nonprofit organization or governmental entity.

(b) Election of State regarding non-applicability

This chapter shall not apply to any civil action in a State court against a volunteer in which all parties are citizens of the State if such State enacts a statute in accordance with State requirements for enacting legislation--

- (1) citing the authority of this subsection;
 - (2) declaring the election of such State that this chapter shall not apply, as of a date certain, to such civil action in the State; and
 - (3) containing no other provisions.
- (Pub. L. 105-19, Sec. 3, June 18, 1997, 111 Stat. 219.)

Title 42 – The Public Health and Welfare Chapter 139 – Volunteer Protection

§14503. Limitation on liability for volunteers

(a) Liability protection for volunteers Except as provided in subsections (b) and (d) of this section, no volunteer of a nonprofit organization or governmental entity shall be liable for harm caused by an act or omission of the volunteer on behalf of the organization or entity if--

- (1) the volunteer was acting within the scope of the volunteer's responsibilities in the nonprofit organization or governmental entity at the time of the act or omission;
- (2) if appropriate or required, the volunteer was properly licensed, certified, or authorized by the appropriate authorities for the activities or practice in the State in which the harm occurred, where the activities were or practice was undertaken within the scope of the volunteer's responsibilities in the nonprofit organization or governmental entity;
- (3) the harm was not caused by willful or criminal misconduct, gross negligence, reckless misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed by the volunteer; and
- (4) the harm was not caused by the volunteer operating a motor vehicle, vessel, aircraft, or other vehicle for which the State requires the operator or the owner of the vehicle, craft, or vessel to--
 - (A) possess an operator's license; or
 - (B) maintain insurance.

(b) Concerning responsibility of volunteers to organizations and entities
Nothing in this section shall be construed to affect any civil action brought by any nonprofit organization or any governmental entity against any volunteer of such organization or entity.

(c) No effect on liability of organization or entity
Nothing in this section shall be construed to affect the liability of any nonprofit organization or governmental entity with respect to harm caused to any person.

(d) Exceptions to volunteer liability protection
If the laws of a State limit volunteer liability subject to one or more of the following conditions, such conditions shall not be construed as inconsistent with this section:

- (1) A State law that requires a nonprofit organization or governmental entity to adhere to risk management procedures, including mandatory training of volunteers.
- (2) A State law that makes the organization or entity liable for the acts or omissions of its volunteers to the same extent as an employer is liable for the acts or omissions of its employees.
- (3) A State law that makes a limitation of liability inapplicable if the civil action was brought by an officer of a State or local government pursuant to State or local law.
- (4) A State law that makes a limitation of liability applicable only if the nonprofit organization or governmental entity provides a financially secure source of recovery for individuals who suffer harm as a result of actions taken by a volunteer on behalf of the organization or entity. A financially secure source of recovery may be an insurance policy within specified limits, comparable coverage from a risk pooling mechanism, equivalent assets, or alternative arrangements that satisfy the State that the organization or entity will be able to pay for losses up to a specified amount. Separate standards for different types of liability exposure may be specified.

(e) Limitation on punitive damages based on actions of volunteers

(1) General rule

Punitive damages may not be awarded against a volunteer in an action brought for harm based on the action of a volunteer acting within the scope of the volunteer's responsibilities to a nonprofit organization or governmental entity unless the claimant establishes by clear and convincing evidence that the harm was proximately caused by an action of such volunteer which constitutes willful or criminal misconduct, or a conscious, flagrant indifference to the rights or safety of the individual harmed.

(2) Construction

Paragraph (1) does not create a cause of action for punitive damages and does not preempt or supersede any Federal or State law to the extent that such law would further limit the award of punitive damages.

(f) Exceptions to limitations on liability

(1) In general

The limitations on the liability of a volunteer under this chapter shall not apply to any misconduct that--

(A) constitutes a crime of violence (as that term is defined in section 16 of title 18) or act of international terrorism (as that term is defined in section 2331 of title 18) for which the defendant has been convicted in any court;

(B) constitutes a hate crime (as that term is used in the Hate Crime Statistics Act (28 U.S.C. 534 note));

(C) involves a sexual offense, as defined by applicable State law, for which the defendant has been convicted in any court;

(D) involves misconduct for which the defendant has been found to have violated a Federal or State civil rights law; or

(E) where the defendant was under the influence (as determined pursuant to applicable State law) of intoxicating alcohol or any drug at the time of the misconduct.

(2) Rule of construction

Nothing in this subsection shall be construed to effect subsection (a)(3) or (e) of this section. (Pub. L. 105-19, Sec. 4, June 18, 1997, 111 Stat. 219.)

References in Text

The Hate Crime Statistics Act, referred to in subsec. (f)(1)(B), is Pub. L. 101-275, Apr. 23, 1990, 104 Stat. 140, which is set out as a note under section 534 of Title 28, Judiciary and Judicial Procedure.

Title 42 – The Public Health and Welfare Chapter 139 – Volunteer Protection §14504. Liability for noneconomic loss

(a) General rule

In any civil action against a volunteer, based on an action of a volunteer acting within the scope of the volunteer's responsibilities to a nonprofit organization or governmental entity, the liability of the volunteer for noneconomic loss shall be determined in accordance with subsection (b) of this section.

(b) Amount of liability

(1) In general

Each defendant who is a volunteer, shall be liable only for the amount of noneconomic loss allocated to that defendant in direct proportion to the percentage of responsibility of that defendant (determined in accordance with paragraph (2)) for the harm to the claimant

with respect to which that defendant is liable. The court shall render a separate judgment against each defendant in an amount determined pursuant to the preceding sentence.

(2) Percentage of responsibility

For purposes of determining the amount of noneconomic loss allocated to a defendant who is a volunteer under this section, the trier of fact shall determine the percentage of responsibility of that defendant for the claimant's harm. (Pub. L. 105-19, Sec. 5, June 18, 1997, 111 Stat. 221.)

C. Florida State Law

Title XLV, TORTS, Chapter 768, NEGLIGENCE

768.13 Good Samaritan Act; immunity from civil liability.--

(1) This act shall be known and cited as the "Good Samaritan Act."

(2)(a) Any person, including those licensed to practice medicine, who gratuitously and in good faith renders emergency care or treatment either in direct response to emergency situations related to and arising out of a public health emergency declared pursuant to s. 381.00315, a state of emergency which has been declared pursuant to s. 252.36 or at the scene of an emergency outside of a hospital, doctor's office, or other place having proper medical equipment, without objection of the injured victim or victims thereof, shall not be held liable for any civil damages as a result of such care or treatment or as a result of any act or failure to act in providing or arranging further medical treatment where the person acts as an ordinary reasonably prudent person would have acted under the same or similar circumstances.

(b)1. Any health care provider, including a hospital licensed under chapter 395, providing emergency services pursuant to obligations imposed by 42 U.S.C. s. 1395dd, s. 395.1041, s. 395.401, or s. 401.45 shall not be held liable for any civil damages as a result of such medical care or treatment unless such damages result from providing, or failing to provide, medical care or treatment under circumstances demonstrating a reckless disregard for the consequences so as to affect the life or health of another.

2. The immunity provided by this paragraph applies to damages as a result of any act or omission of providing medical care or treatment, including diagnosis:

a. Which occurs prior to the time the patient is stabilized and is capable of receiving medical treatment as a non emergency patient, unless surgery is required as a result of the emergency within a reasonable time after the patient is stabilized, in which case the immunity provided by this paragraph applies to any act or omission of providing medical care or treatment which occurs prior to the stabilization of the patient following the surgery.

b. Which is related to the original medical emergency.

3. For purposes of this paragraph, "reckless disregard" as it applies to a given health care provider rendering emergency medical services shall be such conduct that a health care provider knew or should have known, at the time such services were rendered, created an unreasonable risk of injury so as to affect the life or health of another, and such risk was substantially greater than that which is necessary to make the conduct negligent.

4. Every emergency care facility granted immunity under this paragraph shall accept and treat all emergency care patients within the operational capacity of such facility without regard to ability to pay, including patients transferred from another emergency care facility or other health care provider pursuant to Pub. L. No. 99-272, s. 9121. The

failure of an emergency care facility to comply with this subparagraph constitutes grounds for the department to initiate disciplinary action against the facility pursuant to chapter 395.

(c)1. Any health care practitioner as defined in s. 456.001(4) who is in a hospital attending to a patient of his or her practice or for business or personal reasons unrelated to direct patient care, and who voluntarily responds to provide care or treatment to a patient with whom at that time the practitioner does not have a then-existing health care patient-practitioner relationship, and when such care or treatment is necessitated by a sudden or unexpected situation or by an occurrence that demands immediate medical attention, shall not be held liable for any civil damages as a result of any act or omission relative to that care or treatment, unless that care or treatment is proven to amount to conduct that is willful and wanton and would likely result in injury so as to affect the life or health of another.

2. The immunity provided by this paragraph does not apply to damages as a result of any act or omission of providing medical care or treatment unrelated to the original situation that demanded immediate medical attention.

3. For purposes of this paragraph, the Legislature's intent is to encourage health care practitioners to provide necessary emergency care to all persons without fear of litigation as described in this paragraph.

(3) Any person, including those licensed to practice veterinary medicine, who gratuitously and in good faith renders emergency care or treatment to an injured animal at the scene of an emergency on or adjacent to a roadway shall not be held liable for any civil damages as a result of such care or treatment or as a result of any act or failure to act in providing or arranging further medical treatment where the person acts as an ordinary reasonably prudent person would have acted under the same or similar circumstances.

History.--ss. 1, 2, ch. 65-313; s. 1, ch. 78-334; s. 62, ch. 86-160; s. 46, ch. 88-1; s. 4, ch. 88-173; s. 42, ch. 88-277; s. 1, ch. 89-71; s. 37, ch. 91-110; s. 33, ch. 93-211; s. 3, ch. 97-34; s. 1164, ch. 97-102; s. 2, ch. 2001-76; s. 3, ch. 2002-269; s. 65, ch. 2003-416.

1Note.--Section 86, ch. 2003-416, provides that "[i]t is the intent of the Legislature to apply the provisions of this act to prior medical incidents, to the extent such application is not prohibited by the State Constitution or Federal Constitution, except that the changes to chapter 766, Florida Statutes, shall apply only to any medical incident for which a notice of intent to initiate litigation is mailed on or after the effective date of this act."

Title XLV, TORTS, Chapter 768, NEGLIGENCE

768.1345 Professional malpractice; immunity.

No person shall have a claim for professional malpractice against a licensed professional who provides services for which no compensation is sought or received to such person during the period of a declared emergency if the professional services arose out of the emergency and if the professional acted as an ordinary reasonably prudent member of the profession would have acted under the same or similar circumstances.

History.--s. 32, ch. 93-211.

Title XLV TORTS, Chapter 768, NEGLIGENCE

768.1355 Florida Volunteer Protection Act.

(1) Any person who volunteers to perform any service for any nonprofit organization, including an officer or director of such organization, without compensation, except reimbursement for actual expenses, shall be considered an agent of such nonprofit

organization when acting within the scope of any official duties performed under such volunteer services. Such person shall incur no civil liability for any act or omission by such person which results in personal injury or property damage if:

(a) Such person was acting in good faith within the scope of any official duties performed under such volunteer service and such person was acting as an ordinary reasonably prudent person would have acted under the same or similar circumstances; and

(b) The injury or damage was not caused by any wanton or willful misconduct on the part of such person in the performance of such duties.

1. For purposes of this act, the term "nonprofit organization" means any organization which is exempt from taxation pursuant to 26 U.S.C. s. 501, or any federal, state, or local governmental entity.

2. For purposes of this act, the term "compensation" does not include a stipend as provided by the Domestic Service Volunteer Act of 1973, as amended (Pub. L. No. 93-113), or other financial assistance, valued at less than two-thirds of the federal hourly minimum wage standard, paid to a person who would otherwise be financially unable to provide the volunteer service.

(2) Except as otherwise provided by law, if a volunteer is determined to be not liable pursuant to subsection (1), the nonprofit organization for which the volunteer was performing services when the damages were caused shall be liable for such damages to the same extent as the nonprofit organization would have been liable if the liability limitation pursuant to subsection (1) had not been provided.

(3) Members of elected or appointed boards, councils, and commissions of the state, counties, municipalities, authorities, and special districts shall incur no civil liability and shall have immunity from suit as provided in s. 768.28 for acts or omissions by members relating to members' conduct of their official duties. It is the intent of the Legislature to encourage our best and brightest people to serve on elected and appointed boards, councils, and commissions.

(4) This section may be cited as the "Florida Volunteer Protection Act."

History.--s. 1, ch. 93-139; s. 50, ch. 96-399.

Florida Statute

Title X

PUBLIC OFFICERS, EMPLOYEES, AND RECORDS

Chapter 110

STATE EMPLOYMENT

110.501 Definitions.--As used in this act:

(1) "Volunteer" means any person who, of his or her own free will, provides goods or services, or conveys an interest in or otherwise consents to the use of real property pursuant to chapter 260, to any state department or agency, or nonprofit organization, with no monetary or material compensation. A person registered and serving in Older American Volunteer Programs authorized by the Domestic Volunteer Service Act of 1973, as amended (Pub. L. No. 93-113), shall also be defined as a volunteer and shall incur no civil liability as provided by s. 768.1355. A volunteer shall be eligible for payment of volunteer benefits as specified in Pub. L. No. 93-113, this section, and s. 430.204.

(2) "Regular-service volunteer" means any person engaged in specific voluntary service activities on an ongoing or continuous basis.

(3) "Occasional-service volunteer" means any person who offers to provide a one-time or occasional voluntary service.

(4) "Material donor" means any person who provides funds, materials, employment, or opportunities for clients of state departments or agencies, without monetary or material compensation.

History.--s. 1, ch. 78-263; s. 24, ch. 79-190; s. 2, ch. 89-294; s. 671, ch. 95-147; s. 40, ch. 95-418; s. 47, ch. 96-399; s. 2, ch. 98-336; s. 15, ch. 2005-87.

Note.--Former s. 112.901.

110.502 Scope of act; status of volunteers.

(1) Every state department or state agency, through the head of the department or agency, secretary of the department, or executive director of the department, is authorized to recruit, train, and accept, without regard to requirements of the State Career Service System as set forth in part II of this chapter, the services of volunteers, including regular-service volunteers, occasional-service volunteers, or material donors, to assist in programs administered by the department or agency.

(2) Volunteers recruited, trained, or accepted by any state department or agency shall not be subject to any provisions of law relating to state employment, to any collective bargaining agreement between the state and any employees' association or union, or to any laws relating to hours of work, rates of compensation, leave time, and employee benefits, except those consistent with s. 110.504. However, all volunteers shall comply with applicable department or agency rules.

(3) Every department or agency utilizing the services of volunteers is hereby authorized to provide such incidental reimbursement or benefit consistent with the provisions of s. 110.504, including transportation costs, lodging, and subsistence, recognition, and other accommodations as the department or agency deems necessary to assist, recognize, reward, or encourage volunteers in performing their functions. No department or agency shall expend or authorize an expenditure therefor in excess of the amount provided for to the department or agency by appropriation in any fiscal year.

(4) Persons working with state agencies pursuant to this part shall be considered as unpaid independent volunteers and shall not be entitled to unemployment compensation.

History.--s. 2, ch. 78-263; s. 24, ch. 79-190; s. 48, ch. 96-399.

Note.--Former s. 112.902.

110.503 Responsibilities of departments and agencies.--Each department or agency utilizing the services of volunteers shall:

- (1) Take such actions as are necessary and appropriate to develop meaningful opportunities for volunteers involved in state-administered programs.
- (2) Comply with the uniform rules adopted by the Department of Management Services governing the recruitment, screening, training, responsibility, use, and supervision of volunteers.
- (3) Take such actions as are necessary to ensure that volunteers understand their duties and responsibilities.
- (4) Take such actions as are necessary and appropriate to ensure a receptive climate for citizen volunteers.
- (5) Provide for the recognition of volunteers who have offered continuous and outstanding service to state-administered programs. Each department or agency using the services of volunteers is authorized to incur expenditures not to exceed \$100 each plus applicable taxes for suitable framed certificates, plaques, or other tokens of recognition to honor, reward, or encourage volunteers for their service.
- (6) Recognize prior volunteer service as partial fulfillment of state employment requirements for training and experience pursuant to rules adopted by the Department of Management Services.

History.--s. 3, ch. 78-263; s. 24, ch. 79-190; s. 38, ch. 92-279; s. 55, ch. 92-326; s. 42, ch. 96-399; s. 13, ch. 99-399.

Note.--Former s. 112.903.

110.504 Volunteer benefits.--

- (1) Meals may be furnished without charge to regular-service volunteers serving state departments, provided the scheduled assignment extends over an established meal period, and to occasional-service volunteers at the discretion of the department head. No department shall expend or authorize any expenditure in excess of the amount provided for by appropriation in any fiscal year.
- (2) Lodging, if available, may be furnished temporarily, in case of a department emergency, at no charge to regular-service volunteers.
- (3) Transportation reimbursement may be furnished those volunteers whose presence is determined to be necessary to the department. Volunteers may utilize state vehicles in the performance of department-related duties. No department shall expend or authorize an expenditure in excess of the amount appropriated in any fiscal year.
- (4) Volunteers shall be covered by state liability protection in accordance with the definition of a volunteer and the provisions of s. 768.28.
- (5) Volunteers shall be covered by workers' compensation in accordance with chapter 440.

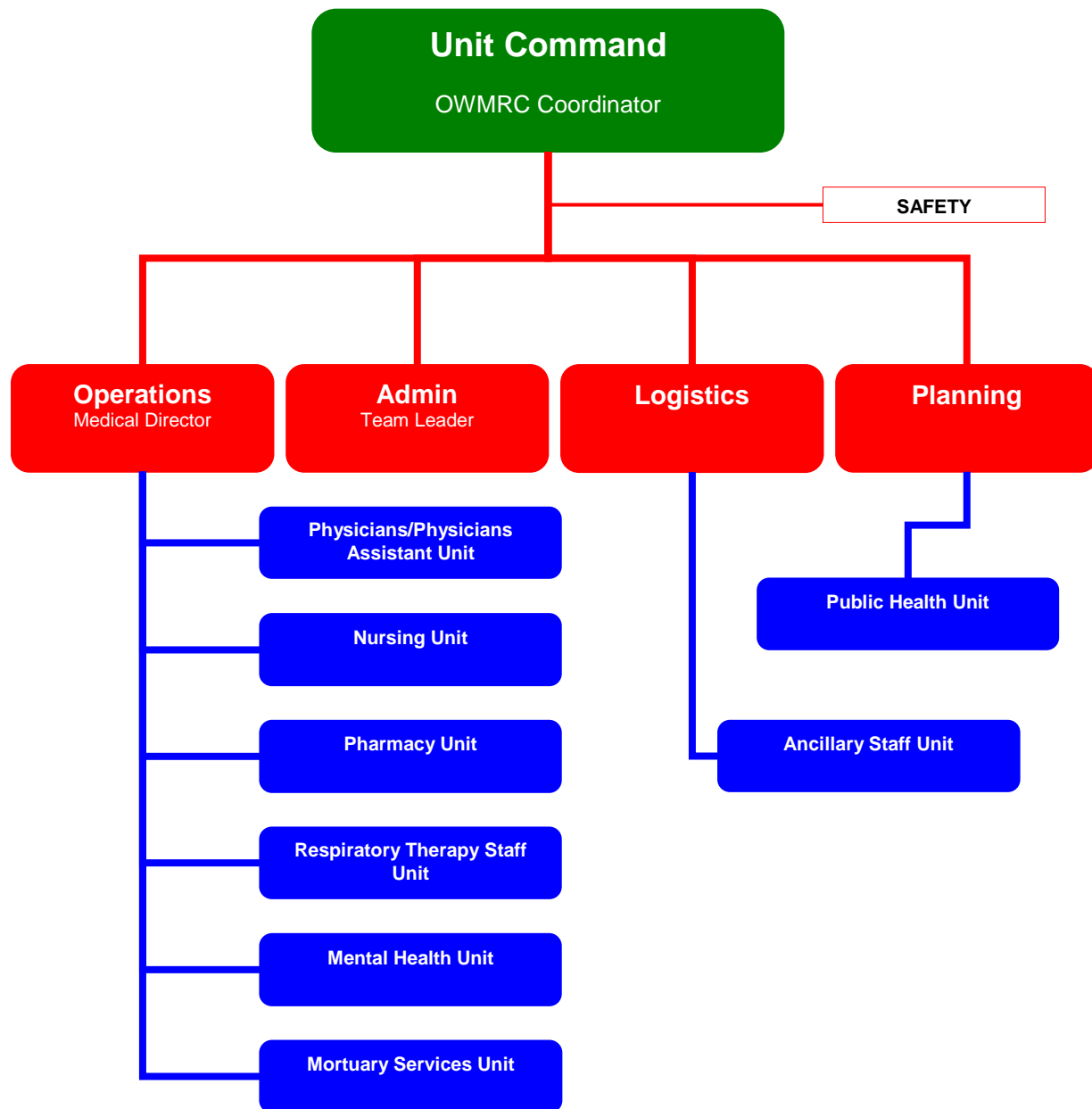
(6) Incidental recognition benefits or incidental nonmonetary awards may be furnished to volunteers serving in state departments to award, recognize, or encourage volunteers for their service. The awards may not cost in excess of \$100 each plus applicable taxes.

(7) Volunteers, including volunteers receiving a stipend as provided by the Domestic Service Volunteer Act of 1973, as amended (Pub. L. No. 93-113), shall be covered by s. 768.1355, the Florida Volunteer Protection Act.

History.--s. 4, ch. 78-263; s. 24, ch. 79-190; s. 8, ch. 83-159; s. 49, ch. 96-399; s. 14, ch. 99-399.

Note.--Former s. 112.904.

APPENDIX A Organization Chart



APPENDIX B

Position Descriptions

OWMRC personnel will normally be integrated into an incident management structure in the field or healthcare facility and will assist primary responders or medical personnel with emergency medical and medical support operations. OWMRC personnel shall be trained in Basic Incident Command System (ICS) so that they may assume ICS positions and duties commensurate with their training, experience, licensure and certifications.

Physician: Evaluate clients, perform medical examinations, review medical history, refill or prescribe medications, assess mental health needs and refer to the mental health team (if needed). Must have a valid Florida medical license and training. All licenses will be verified by Florida medical quality assurance (MQA).

Physician Assistant: Evaluate clients, perform medical examinations, review medical history, refill/prescribe medications under the team physician, and assess mental health needs. Must have a valid Florida physician assistant license and training. All licenses will be verified by Florida medical quality assurance (MQA).

Nurses: Complete patient intake, review patient medication and current illness/problem, and assist the physician or physician assistant. Must have valid Florida nursing license and training. All licenses will be verified by Florida medical quality assurance (MQA).

Mental Health Counselors: Assess and assist patients with mental health issues, evaluate patients referred from team physician, knowledge of crisis counseling, communicate with the team Psychiatrist if hospitalization is needed. Must hold a valid Florida Licensed Professional Counselor or Licensed Clinical Social Workers licensure. All licenses will be verified by Florida medical quality assurance (MQA).

OWMRC volunteers responding with the OCHD will perform duties in accordance with position or job descriptions already included in the Okaloosa County All-Hazard Plan. See specifically [Mass Prophylaxis](#), [Special Needs Shelter](#) and [Strategic National Stockpile](#) plans.

APPENDIX C

Key Personnel

OWMRC Coordinator:

Elaine Bieber

(850) 833-9240 ext 2304

(850) 699-4228 (cell)

OWMRC Team Leader

Kellie Knight

(850) 833-9240 ext 2381

(850) 305-0303 (cell)

OWMRC Assistant Team Leader

Katie Holbrook

(850) 833-9240 ext 2149

OWMRC Assistant Team Leader

Kathryn Barley

(850) 892-8015 ext 1152

APPENDIX D

Training Requirements

OWMRC volunteers shall be required to successfully complete the following required initial training courses before being eligible to participate in an actual OWMRC activation:

1. **OWMRC Orientation*** - This course provides volunteers with an overview of OWMRC. This course shall cover topics such as:
 - Background of the Medical Reserve Corps program
 - Purpose and mission of the OWMRC
 - OWMRC organization and composition
 - Expected roles, tasks and duties of OWMRC volunteers in an emergency
 - OWMRC core competencies
 - OWMRC concept of operations
 - OWMRC training and exercise program
 - Uniforms and equipment
 - OWMRC policies
 - DOH rules and regulations
 - Liability protection for volunteers
2. **MRC Core Competencies:** (www.nova.edu/allhazards) – This course provides a brief overview on the following topics:
 - Health, Safety, and Personal Preparedness
 - Psychological First Aid
 - Roles and Responsibilities of MRC volunteers
 - Points of Distribution (PODs)
 - Vulnerable Populations
 - Incident and Unified Command SystemsThe course is offered online, as well as in the classroom setting for volunteers without internet access.
3. **IS-22: Are You Ready? Disaster Preparedness Training**** (<http://training.fema.gov/EMIWeb/IS/is22.asp>) – This course focuses on disaster preparedness to help individuals and families get better prepared for emergencies. The classes will include planning for emergencies, building emergency kits, training for emergencies, volunteering in the community during emergencies, blood services during disasters, and seasonal safety tips.
4. **IS-100.b: Basic Incident Command System Course** (* as necessary)** (<http://training.fema.gov/EMIWeb/IS/IS100b.asp>) - This course is designed to provide students with a basic understanding of the principles of the Incident Command System (ICS) and to acquaint students with the basic ICS structure and terminology. This course introduces students to ICS organization and structure, basic terminology and common responsibilities. Basic ICS courses are available as a self-study course on the FEMA website. <http://training.fema.gov/EMIWeb/IS/crslist.asp>
5. **IS-700.a: National Incident Management System (NIMS), An Introduction** (* as necessary)** (<http://training.fema.gov/EMIWeb/IS/is700a.asp>) or (www.aheceducation.com) - This course introduces NIMS. It explains the purpose, principles, key components and benefits of NIMS. The course also contains “Planning Activity” screens giving you an opportunity to complete

some planning tasks during this course. The planning activity screens are printable so that you can use them after you complete the course.

6. **IS-200H**Ca Applying ICS to Healthcare Organizations** (* as necessary)
(<http://training.fema.gov/EMIWeb/IS/is200HCa.asp>) or (www.aheceducation.com) - ICS 200.HCa is designed to enable healthcare/hospital personnel to operate efficiently during an incident or event within the Incident Command System (ICS). ICS-200 provides training on and resources for personnel who are likely to assume a supervisory position within the ICS. IS-100 is a pre-requisite to the IS-200 course. *For supervisory roles only.*

The following classes are not required for all volunteers but are recommended.

1. **IS-800.b:** National Response Framework, An Introduction**
(<http://www.training.fema.gov/emiweb/IS/is800b.asp>) - The National Response Plan, or NRP, describes how the Federal Government will work in concert with State, local, and tribal governments and the private sector to respond to disasters. This course introduces the NRP. It is intended for DHS and other Federal staff responsible for implementing the NRP, and Tribal, State, local and private sector emergency management professionals. This class is intended for those seeking supervisory roles.
2. **Strategic National Stockpile Training** -This course will include a review of the ICS System, detailed descriptions of jobs and stations, description of clinic flow and clinic algorithms, a general overview of the Strategic National Stockpile (SNS), operations of a Point of Dispensing Site (POD) and the OWMRC volunteer's role within a dispensing site.
3. **Psychological First Aid:**
(http://www.medicalreservecorps.gov/file/mrc_resources/mrc_PFA.doc) – Describes the impact of an event on the mental health of the MRC member and their family, team, and others.

OWMRC members who are physicians, nurses, pharmacists, EMTs/paramedics or other licensed and/or certified healthcare professionals and fill OWMRC positions utilizing their specialized medical skills (i.e. Type 1 positions) must ensure their medical training, licenses and/or certifications are current for the duration of their OWMRC Type 1 appointments.

* Courses will be offered in a classroom setting.

** Courses are to be completed online and volunteer should send certificate of completion to OWMRC Team Leader.

APPENDIX E Bylaws

I. ORGANIZATION NAME

The name of the organization is Okaloosa-Walton Medical Reserve Corps.

II. OFFICE

The principal office of the OWMRC is 221 Hospital Dr NE, Fort Walton Beach, FL 32548 in the Okaloosa CHD facility.

III. PURPOSE AND FUNCTION

- A. The OWMRC is the component of the local Citizen Corps that brings together local health professionals and others with relevant health-related skills to volunteer in their community. These volunteers will assist the local, existing community emergency medical response system, as well as provide a group of readily trained and available resources to help the community deal with pressing public health needs and improvements, and emergencies.
- B. The OWMRC unit is intended to supplement the resources of the existing community emergency medical response system, as well as contribute to meeting the public health needs of the community throughout the year. The OWMRC unit will not replace or supplant the existing emergency medical response system or its resources.

IV. QUALIFICATIONS

The OWMRC determines the qualifications of its members.

V. MEMBERSHIP

A. Active Membership

- Active membership requires the following criteria to be met:
 - Current medical licensure or certification necessary (and confirmation of this certification) to perform the duties of the position occupied as an emergency medical responder with the MRC, if applicable.
 - Completion of requisite training.
 - Attendance at a minimum of one regularly scheduled OWMRC meeting per year.
 - Participation in at least one OWMRC exercise or activation per year.
- Renewal of active membership for the upcoming year will occur if the member renews their CPR/First Aid certification (if required) and attends at least one regularly scheduled meeting during the year. Members who do not meet this requirement will receive a letter from the OWMRC Coordinator reminding them of their responsibilities to continue active membership during the upcoming year. If the second year minimum attendance is not met, then the member will receive a letter from the OWMRC Coordinator notifying them of their membership

classification changing to associate until the requirements for active membership are satisfied.

B. Associate Membership

- Associate membership shall be granted to volunteers upon return of the membership application and successful completion of a background check.
- Associate members are those OWMRC volunteers who have not satisfied the requirements for active membership described in Section A above. Associate members will become active members once these requirements are satisfied.
- Associate members may not participate in actual emergency medical response operations with the OWMRC unless authorized.
- However, associate members may participate in all OWMRC training activities and exercises in positions within their current training.

VI. FIELD IDENTIFICATION SHIRTS

A. When activated, OWMRC volunteers shall be issued field identification shirts with the OWMRC logo on the chest. The wear of field identification shirts by OWMRC volunteers serves several purposes:

- Clearly identifies volunteers as official members of the OWMRC.
- Enhances esprit de corps of OWMRC volunteers and facilitates a professional appearance.
- Establishes a visual link between the OWMRC and other participating agencies.

B. The following policies apply to the wear of the OWMRC uniform:

- Only members of the OWMRC are authorized to wear the official OWMRC shirt.
- The OWMRC shirt must be worn during emergency response activities and when members are performing non-emergency duties assisting community organizations.
- The OWMRC shirt should also be worn by OWMRC members during exercises or other training activities.

VI. BOARD OF ADVISORS

A. General Powers

The OWMRC Board of Advisors is responsible for:

- Development of program policy.
- Volunteer recruitment and development.
- Identifying and capitalizing on funding opportunities.

B. Composition of the Board of Advisors

- The Board of Advisors shall consist of not less than 5, nor more than 10 members.
- Advisors must be active members of the OWMRC.
- Each Advisor shall be elected to serve a term of 3 years.
- With the exception of the OWMRC Coordinator, OWMRC Team Leader and Assistant Team Leader, no member shall serve more than two full consecutive terms on the Advisory Board.

- Members may be re-elected after one year's absence from the Board of Advisors.
 - Members shall include:
 - OWMRC Coordinator (permanent member)
 - OWMRC Team Leader (permanent member)
 - OWMRC Assistant Team Leader (permanent member)
 - Okaloosa and Walton County Health Department representatives
 - A minimum of two OWMRC volunteers
 - Board vacancies may be filled at any general meeting upon nomination and a majority vote of the members present at such meeting.
 - An Advisor may resign at any time by giving notice in writing thereof. An Advisor may be removed by the majority vote of members present at any meeting of the Board of Advisors.
- C. Board Structure
- The officers of the OWMRC Board of Advisors shall include a President, Vice President, and Secretary. Officers shall receive no compensation.
 - Officers shall be elected annually by the Board of Advisors with such election to be conducted at the first Board meeting of the calendar year.

VII. MEETINGS AND COMMUNICATIONS

Meetings, communications, and training and exercise opportunities are the primary means of volunteer retention. Meetings and other communications also serve as a means of notifying volunteers of OWMRC activities.

- A. Regular meetings of OWMRC shall be held semi-annually. Special meetings shall be held whenever called by the OWMRC Coordinator, or upon request. A minimum of seven days notice will be required for all meetings.
 - The time and place of all regular OWMRC meetings shall be designated by the OWMRC Coordinator.
- B. The annual meeting for the OWMRC Board of Advisors will be held in January. Regular meetings for the OWMRC Board of Advisors will be held semi-annually. Special meetings of the Board of Advisors shall be called by the Advisory Board President at the request of any three Advisors. A minimum of seven days notice will be required for all meetings.
 - The time and place of all meetings of the Board of Advisors shall be designated by the Advisory Board President.
- D. Quarterly Newsletter: the OWMRC Coordinator, Team Leaders and Board of Advisors contribute to a quarterly OWMRC newsletter. Volunteers are welcome to suggest and provide articles for the newsletter. Active volunteers are "spotlighted" in the newsletter. The newsletter is emailed quarterly (mailed to those few without email). Past issues are on file in the OWMRC Team Leader's office.

- E. Communications during non-emergency periods are made through e-mails and telephone calls
- F. Communication with the media is not allowed, unless the volunteer has been designated as the Public Information Officer (PIO). If the media approaches an OWMRC volunteer who is not the PIO, they shall direct all questions to Incident PIO.
- G. OWMRC Coordinator will ensure OWMRC volunteers are included in Okaloosa CHD and county training sessions and exercises when appropriate. Volunteers are always invited to attend the Okaloosa CHD October and April preparedness training days and the annual Okaloosa CHD full-scale exercise.

VIII. AMENDMENTS

- A. Proposed amendments to the policies may be presented at any regularly scheduled meeting of the OWMRC.
- B. Amendments will occur if two-thirds of the active and associate membership vote in favor (present, proxy, absentee or electronic) following discussion.

IX. REVIEW




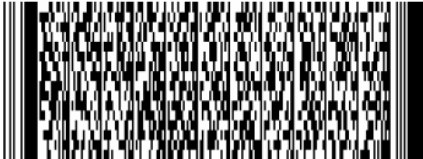
- A. These policies will be reviewed every three years:
 - The Board of Advisors shall appoint a special committee to review the policies.
 - The recommendations shall be presented to the entire OWMRC membership at a regular OWMRC meeting.
- B. Amendments to the policies may also occur as described in Section VIII above.

X. CODE OF ETHICS

All OWMRC members shall follow the HIPAA (Health Insurance Portability and Accountability Act of 1996) Privacy Rule guidelines. These guidelines have been designed and laid out to protect individual's health information. Further information on these guidelines can be found at: <http://www.hhs.gov/ocr/hipaa/>.

APPENDIX F

OWMRC Identification Card

  Elaine Bieber Okaloosa-Walton MRC Expires: 07/23/2010 	<p>STATE OF FLORIDA Florida Department of Health</p> <p>This certifies that the Bearer is a duly authorized representative of this organization. The Bearer has critical Medical Reserve Corps responsibilities in accordance with Chapter 381.0205 Florida Statutes.</p> <p>IF FOUND, please mail to: FDOH Office of Public Health Nursing 4052 Bald Cypress Way Bin C27-HDSHPHN Tallahassee, FL 32399-1708</p>  148 636010